## RECEIVED CENTRAL FAX CENTER

MAY 1 U 2006

PTO/SB/22 (12-04)

Approved for use through 07/31/2006. OM8 0651-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)	Docket Number (Optional)				
FY 2005	<b>i</b>	HALB: 045				
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)	~					
Application Number 10/656, 684  For Calling Fluid and Mathewal Care		, 2003				
Disting I later and I remod for	Enhanced S	uspension				
Art Unit 17/2	Examiner Philip (	Tucker				
This is a request under the provisions of 37 CFR 1.136(a) to extend the pe application.	riod for filing a reply in the a	tbove identified				
The requested extension and fee are as follows (check time period desired	and enter the appropriate f	ee below):				
<u>Fee</u>	Small Entity Fee					
One month (37 CFR 1.17(a)(1)) \$120	\$60	\$				
Two months (37 CFR 1.17(a)(2)) \$450	\$225	s				
Three months (37 CFR 1.17(a)(3)) \$1020	<b>\$510</b>	s 1020				
Four months (37 CFR 1.17(a)(4)) \$1590	\$795	\$				
Five months (37 CFR 1.17(a)(5)) \$2160	\$1080	s				
Applicant claims small entity status. See 37 CFR 1.27.	05/11/2086 TL0111	66666617 16656684				
A check in the amount of the fee is enclosed.	01 FC:1253	1020.00 0				
Payment by credit card. Form PTO-2038 is attached.						
The Director has already been authorized to charge fees in this	application to a Deposit	Account.				
The Director is hereby authorized to charge any fees which may	be required, or credit an	y overpayment, to				
Deposit Account Number 50-0807 . I have WARNING: Information on this form may become public. Credit card information.						
Provide credit card information and authorization on PTO-2038.	usriou stonia not de include	d on this form.				
I am the applicant/inventor,						
	NG					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).						
attorney or agent of record. Registration Number		<u>.</u>				
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34						
Regional of Fracting Lines 37 CFR 1.34	<u> </u>					
Signature Signature	1 / lay le	0,2006				
Karen B. Triza	713 65	29277				
Typed or printed name	Telephone	Number				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their represer signature is required, see below.	ntative(s) are required. Submit multi	ple forms if more than one				
Total of forms are submitted.						

This collection of information is required by 37 CPR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CPR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce. P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9189 and select option 2.

Fee (\$)

Fee Paid (\$)

Fees Paid (\$)

PTO/SB/17 (01-05) Approved for use through 07/31/2006, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of info mation unless it displays a valid OMB control number Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). RECEIVED Application Number 10/656,684 FEE TRANSMITTAL CENTRAL FAX CENTER Filing Date September 5, 2003 For FY 2006 First Named Inventor Jeff Miller 0 2006 **Examiner Name** PHILIP C. TUCKER Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1712 TOTAL AMOUNT OF PAYMENT (\$) 1620.00 Attorney Docket No. **HALB:045** METHOD OF PAYMENT (check all that apply) Check ✓ Credit Card | Other (please identify): if charge cannot be made, then Money Order ✓ Deposit Account Deposit Account Number: <u>50-0807</u> Deposit Account Name: Karen B. Tripp, Attorney For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) ✓ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card Information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filling or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity** Small Entity **Small Entity** Application Type Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 200 Design 100 100 50 130 Plant 200 100 300 160 150 80 300 Reissue 150 500 600 250 300 Provisional 200 100 0 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (\$) Fec (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims Fee Paid (\$) Multiple Dependent Claims Fee (\$) \_ • 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total daims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = 200 600 HP = highest number of independent daims paid for, if greater than 3. **APPLICATION SIZE FEE** If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50

Other (e.g	., late fi	ling surcharge):	3 month extension	Wayan	1,020	
SUBMITTED BY						
Signature	KC	dren B.	Tusi	Registration No. (Attorney/Agent) 30,452	Telephone 713 658 9323	
Name (Print/Type	) Karen	B. Tripp	- <i>UU</i>		Date May 10, 2006	

\_\_ (round up to a whole number) x

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Non-English Specification, \$130 fee (no small entity discount)

4. OTHER FEE(S)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commono. P.O. Box 1460, Alexandria, VA 22318-1450. DO NOT SEND FEEG OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450.

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